

FILED
OCT-5 PM 1:17
RICHARD W. WIERING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

(PR)

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

CW

Jeffrey T. Burts

Plaintiff

vs.

E. Abanico, et al.

Defendant.

CASE NO.

**PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS**

I, Jeffrey T. Burts, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: 0 Net: 0

Employer: 0

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received. (If you are imprisoned, specify the last place of
2 employment prior to imprisonment.)

3 SSI
4 _____
5 _____

6 2. Have you received, within the past twelve (12) months, any money from any of the following
7 sources:

- 8 a. Business, Profession or Yes ___ No ☒
9 self employment
- 10 b. Income from stocks, bonds, Yes ___ No ☒
11 or royalties?
- 12 c. Rent payments? Yes ___ No ☒
13 d. Pensions, annuities, or Yes ___ No ☒
14 life insurance payments?
- 15 e. Federal or State welfare payments, Yes ___ No ☒
16 Social Security or other govern-
17 ment source?

18 If the answer is "yes" to any of the above, describe each source of money and state the amount
19 received from each.

20 _____
21 _____

22 3. Are you married? Yes ☒ No ___

23 Spouse's Full Name: MELISS GAYER BURTS

24 Spouse's Place of Employment: separated

25 Spouse's Monthly Salary, Wages or Income:

26 Gross \$ _____ Net \$ _____

27 4. a. List amount you contribute to your spouse's support: \$ 0

28 b. List the persons other than your spouse who are dependent upon you for support

Children, list only their initials and age. (DO NOT INCLUDE)

(A.B) 2 1/2 years of age

5. Do you own or are you buying a home? Yes ___ No ☒

6. Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

6. Do you own an automobile? Yes ___ No ☒

7. Make _____ Year _____ Model _____

8. Is it financed? Yes ___ No ___ If so, Total due \$ _____

9. Monthly Payment: \$ _____

7. Do you have a bank account? Yes ___ No ☒ (Do not include account numbers.)

10. Name(s) and address(es) of bank: _____

11. _____

12. Present balance(s): \$ _____

13. Do you own any cash? Yes ___ No ☒ Amount: \$ _____

14. Do you have any other assets? (If "yes," provide a description of each asset and its estimated

15. market value.) Yes ___ No ☒

16. _____

17. What are your monthly expenses?

18. Rent: \$ 0 Utilities: 0

19. Food: \$ 0 Clothing: 0

20. Charge Accounts:

21. Name of Account	22. Monthly Payment	23. Total Owed on This Acct.
24. _____	\$ _____	\$ _____
25. _____	\$ _____	\$ _____
26. _____	\$ _____	\$ _____

27. 9. Do you have any other debts? (List current obligations, indicating amounts and to whom

28. they are payable. Do not include account numbers.) Restitution and child support

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

September 1, 2007
DATE

Jeffrey (Todd) Burts
SIGNATURE OF APPLICANT

Case Number: _____

CERTIFICATE OF FUNDS

IN

PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of

BURTS P72028 for the last six months at
[prisoner name]

CORRECTIONAL TRAINING FACILITY where (s)he is confined.
[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 0 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 0.

Dated: 10-1-07

Brenda Sation, Acct Technician
Authorized officer of the institution

CORRECTIONAL TRAINING FACILITY

TRUST OFFICE

THIS INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
HERE.

10-1-07
DEPARTMENT OF CORRECTIONS

Brenda Sation
Trust Office
Account Technician

00001000

PAGE NO: 1

CALIFORNIA DEPARTMENT OF CORRECTIONS
CTF SOLEDAD/TRUST ACCOUNTING
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: MAY 02, 2007 THRU OCT. 01, 2007

ACCOUNT NUMBER : P72028 BED/CELL NUMBER: CFCWT1000000104L
ACCOUNT NAME : BURTS, JEFFREY ACCOUNT TYPE: I
PRIVILEGE GROUP: A

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
09/22/2007	H118	LEGAL COPIES HOLD	1002 LCOPY	1.60
09/22/2007	H118	LEGAL COPIES HOLD	1002 LCOPY	1.50

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	3.10	0.00

CURRENT
AVAILABLE
BALANCE

3.10-

RECEIVED
CALIFORNIA DEPARTMENT OF CORRECTIONS
TRUST OFFICE



THIS STATEMENT IS A CORRECT
REPRESENTATION OF THE ACCOUNT MAINTAINED

10-1-07
CALIFORNIA DEPARTMENT OF CORRECTIONS
BY Brenda Nation
TRUST OFFICE

Account Technician

STATE OF CALIFORNIA

CDC - 193 (1/88)

DEPARTMENT OF CORRECTIONS

CORRECTIONAL TRAINING
FACILITY

TRUST ACCOUNT WITHDRAWAL ORDER

2007 OCT -1 AM 9:30

Date September 28, 2007

To: Warden

Approved

C. Core

I hereby request that my Trust Account be charged \$ _____ for the purpose stated below and authorize the withdrawal of that sum from my account:

P72028

NUMBER

State below the PURPOSE for which withdrawal is requested (do not use this form for Canteen or Hobby purchase).

PURPOSE _____

Jeffrey (Todd) Burtis

NAME (Signature please, DO NOT PRINT)

PRINT PLAINLY BELOW name and address of person to whom check is to be mailed.

NAME Office of the Clerk

ADDRESS U.S. Court House

450 Golden Gate Avenue

SAN FRANCISCO, CA 94102-3483

Jeffrey (Todd) Burtis

PRINT YOUR FULL NAME HERE

PROOF OF SERVICE BY MAIL

BY PERSON IN STATE CUSTODY

(Fed. R. Civ. P. 5; 28 U.S.C. § 1746)

I, Jeffrey T. Burts, declare:

I am over 18 years of age and a party to this action. I am a resident of CTF-Cental, Soledad

Prison,

in the county of Monterey

State of California. My prison address is: CTF, P.O. Box 689, Soledad CA 93960

On _____
(DATE)

I served the attached: Complaint and In Forma Pauperis

(DESCRIBE DOCUMENT)

on the parties herein by placing true and correct copies thereof, enclosed in a sealed envelope, with postage thereon fully paid, in the United States Mail in a deposit box so provided at the above-named correctional

institution in which I am presently confined. The envelope was addressed as follows:

Office of the Clerk
United States District Court for the Northern District
U.S. Courthouse
450 Golden Gate Avenue
San Francisco, CA 94102-3483

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on September 27, 2007
(DATE)

Jeffrey (Todd) Burts
(DECLARANT'S SIGNATURE)